



**RHIP Behavioral Health Identification & Awareness Workgroup**

**Deschutes County Building (DeArmond Room)**

**1300 NW Wall St, Bend**

**Agenda: June 27, 2017 from 8:15am-9:30am**

**Goals**

**Clinical Goal(s):** (1) Increase screenings for depression, anxiety, suicidal ideation, and substance use disorders.

(2) When screenings are positive, increase and improve primary care-based interventions, and, when appropriate, referrals and successful engagement in specialty services.

**Prevention Goal(s):** Normalize the public’s perception of accessing resources for depression, anxiety, suicidal ideation, and substance use.

Health Indicators by 2019	QIM Measure	State Measure	Healthy People 2020
1. Number of SBIRT/CRAFFT screenings provided in healthcare settings shall exceed 12% (Oregon Health Authority, 2015).	√		
2. Number of Depression screenings and follow-up care provided in healthcare settings shall exceed 25% (Oregon Health Authority, 2015).	√		
3. First year develop a baseline of successful referral and engagement in specialty care from primary care. Second year develop performance improvement benchmarks.			

1. **8:15-8:20**      **Introductions—All**
  
2. **8:20-9:30**      **Continue A3—All**
  - **Identify and engage 100% of individuals in Central Oregon that have a behavioral health need, and ensure an effective and timely response.**
  
3. **9:30**              **Action Items—All**
  - **Next steps**

**Next Meeting:** **July 25, 2017 from 8:15-9:30am**  
**(Deschutes County Bldg, 1300 NW Wall St, Bend: DeArmond Room)**



<b>BH Screening and Awareness (21)</b>	<b>Organization</b>
DeAnn Carr, LCSW	Deschutes County Health Services
McKenzie Dean, MD	St. Charles Health System
Janet Foliano-Kemp	St. Charles Health System
Mike Franz, MD	PacificSource
Erica Fuller, MA, LPC, CADCI	Rimrock Trails Adolescent Treatment Services
Jessica Jacks, MPH, CPS	Deschutes County Health Services
Susan Keys, PhD	OSU Cascades
Malia Ladd, EdD	CAC Consumer Representative/NeighborImpact
Nicole Lemmon, MA	Wellness & Education Board of Central Oregon (WEBCO)
Christy Maciel, PSS	National Alliance on Mental Illness (NAMI)
Sondra Marshall, PhD	COPA & St. Charles Health System
Wade Miller, MBA	Central Oregon Pediatrics Associates (COPA)
Leslie Neugebauer, OTR/L, MPH	PacificSource
Kristi Nix, MD	High Lakes Healthcare
Laura Pennavaria, MD	La Pine Community Healthy Center
John Peoples, MD, FAAP	Central Oregon Pediatrics Associates (COPA)
Megan Sergi, MSW	Rimrock Trails Adolescent Treatment Services
Kim Swanson, PhD	Mosaic Medical
Rick Treleaven, LCSW	BestCare Treatment Services
Molly Wells Darling, LCSW	St. Charles Health System
Scott Willard, MA, CADC II, SRC, CPC	Lutheran Community Services Northwest

## **RHIP Workgroup Updates: May**

### **Behavioral Health: Identification & Awareness (Support: Rebeckah Berry, Rick Treleaven & Nikki Lemmon)**

- This group meets the fourth Tuesday of every month from 8:15-9:30am and currently has 21 members.
- In May, the group continued their A3 process around creating a common response matrix that clinics could adopt, including physician intervention, BHC intervention, short-term behavioral health intervention, and referral to specialty behavioral health.

### **Behavioral Health: Substance Use and Chronic Pain (Support: Rebeckah Berry, Rick Treleaven & Mike Franz)**

- This group meets the third Wednesday of every month from 3:45-5pm and currently has 23 members.
- In May, the group began reviewing and evaluating how to measure their metrics for the Substance Use & Chronic Pain area of focus. Once this group completes this process, they will begin their A3 (likely in July) around making SUD engagement services available at hospitals and primary care clinics.

### **Cardiovascular Disease—Clinical (Support: Rebeckah Berry & Shiela Stewart)**

- This group meets the fourth Tuesday of every month from 3:45-5pm and currently has 10 members.
- In May, this workgroup continued their A3 around promoting/saturating SmokeFree Oregon cessation and prevention campaigns in Central Oregon.

### **Diabetes—Clinical (Support: Rebeckah Berry & Therese McIntyre)**

- This group meets the second Thursday of every month from 9-10:30am and currently has 14 members.
- In May, this workgroup continued their A3 around implementing community-wide standards for the prevention and treatment of type 2 diabetes.

### **CVD & Diabetes: Prevention (Support: MaCayla Arsenault, Sarah Worthington, & Steve Strang)**

- This group meets the fourth Tuesday of every month from 3:30-5pm and currently has 26 members.
- In May, this workgroup reviewed updated data for their metrics and continued their A3 around removing barriers for students participating in physical activities. Next month they will continue with their gap analysis, but have determined their first step is to build relationships and partnerships with schools.

## **RHIP Workgroup Updates: May**

### **Oral Health (Support: Donna Mills & Mary Ann Wren)**

- This group meets the third Tuesday of every month from 11-12pm and currently has 23 members.
- The Oral Health Workgroup participated in a prioritizing exercise to narrow the experiments as defined Box 6 of their A3. Next meeting steps will begin to move to action and prepare the A3 for the Operations Council.

### **Reproductive Health/Maternal Child Health (Support: Donna Mills & Muriel DeLaVergne-Brown)**

- This group meets the second Tuesday of every month from 4-5pm and currently has 22 members.
- The Reproductive Maternal/Child Health Workgroup heard a presentation on the Perinatal Care Continuum proposal funded by the COHC last year. A robust conversation followed on the successes of the program. Next month the group will begin to prioritize work around the action steps they want to embark on next.

### **Social Determinants of Health**

- This group meets the third Friday of every month from 10:30-11:30am and currently has 26 members in Kindergarten Readiness and 37 members in Housing.

#### **Education & Health (Support: Donna Mills & Desiree Margo)**

- The Kindergarten Readiness workgroup participated in a census building exercise – revealing three priority areas to begin A3s on: Access to Integrated Services, Literacy, and Social and Emotional Support. Next steps include articulating the aim statements within the sub-groups.

#### **Housing (Support: Bruce Abernethy & MaCayla Arsenault)**

- In May, the workgroup reviewed and refined their drafted A3 around addressing the problem that Central Oregon communities do not have a comprehensive understanding of the current housing/homelessness needs which results in missed opportunities for additional funding, unaligned efforts, and a lack of commitment to act. In their gap analysis, they decided to start with completing a Housing Needs Assessment.